

## General Art Entry Form

ONE SECTION PER ENTRY FORM - Entry Fee **must** accompany Entry Form NO LATE ENTRIES WILL BE ACCEPTED

## PLEASE PHOTOCOPY THIS ENTRY FORM IF ADDITIONAL SPACE IS REQUIRED

Entrant's Details							
(Please print clearly)  Entrant Nam <u>e:</u>							
Address	5:						
Email:							
CLASS	MEDIUM	TITLE OF ARTWORK	SALE PRICE	ENTRY FEE	Office Number	Received	Return
		TOTAL (incl GST)					
It is a condition of entry to the Roma Show that all exhibitors must complete a declaration of their taxation status. Please tick appropriate box and record your ABN where applicable. I also agree that the Roma Show Society may issue a Recipient Created Tax Invoice in respect to Prize Money on my behalf.  Are you undertaking this activity as a hobby?  Is this activity part of a business?  Yes No If yes, do you have an ABN?  Yes No If yes, your ABN number Yes, your ABN number Yes No If yes, your ABN number Yes Yes No If yes, your ABN number Yes Yes No Interview Yes							
DISABILITY Only tick if you have a disability and wish to be considered for the Achievement over Adversity Award							
I hereby accept all the conditions of Entry and declare these entries are my original work completed in the last 12 months.							
Competitor's Declaration: - By signing this Entry Form, all competitor's/Exhibitors have read and understood the Rules and Regulations and agree to be bound by such. Competitor's/Exhibitor's also consent and agree that the Roma Show Society has the right to take or use photography of him or her (and/or your property) and use the photos in all marketing and media worldwide, including online, now and in the future, as per the relevant Section Schedule.							
Name:		Receipt (Please o	omplete and hand	to Section Steward	(k		
Addres	ss:						
No of Classes: Total Entry Fees Paid: Paid by: Cash/Cheque/Direct Deposit							
Signed (by Entrant):							



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Web: <u>www.romashow.com</u> Facebook: <u>www.facebook.com/romashowsociety/</u>

Roma Show Society Inc ABN 49 334 968 854